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## FEC FORM 2

## STATEMENT OF CANDIDACY

							=
1.	(a) Name of Candidate (in full)						
	Hoh, Matthew, Patrick, Mr,	97.0	1 % 11			10.00 "11.11 FF011 (" " N )	_
	(b) Address (number and street) PO Box 1127	<b>Æ</b> L CI	neck if addres	s changed		Candidate's FEC Identification Number     S2NC00562	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	Wake Forest		NC	27588	3	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Soug	nt		6. State & Dist	rict of Candidate	
	GREEN PARTY	Senate			NC	00	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7.	I hereby designate the following nar	med political cor	mmittee as my	/ Principal (	Campaign Comn	nittee for the $\frac{2022}{\text{(year of election)}}$ election(s).	
	NOTE: This designation should be f	iled with the ap	oropriate offic	e listed in th	ne instructions.		_
(a) Name of Committee (in full)  MATTHEW HOH FOR SENATE							
	(b) Address (number and street)						_
	339 E PINE						
	AVE						
	(c) City, State, and ZIP Code						
	WAKE FOREST				NC	27587	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)							
0	I horoby authorize the following nam	and committee	which is NOT	my principa	al compoign con	nmittee, to receive and expend funds on behalf of my	
0.	candidacy.	ied committee,	WITIGIT IS INOT	тту рттыр	ai campaign con	infinitee, to receive and expenditurius on behalf of my	
	NOTE: This designation should be f	iled with the pri	ncipal campai	gn committe	ee.		
	(a) Name of Committee (in full)						_
	(b) Address (number and street)						
							_
	(c) City, State, and ZIP Code						_
	(c) City, State, and ZIP Code						_
	(c) City, State, and ZIP Code						_
		mined this State	ement and to	the best of i	my knowledge a	and belief it is true, correct and complete.	_
	I certify that I have exa	mined this State	ement and to	the best of I	my knowledge a	and belief it is true, correct and complete.  Date	_ _ _
Siç		mined this State	ement and to			Date	<u> </u>
Siç	I certify that I have exa	mined this State	ement and to		my knowledge a ronically Filed]	·	
Siç	I certify that I have exa	mined this State	ement and to			Date	_ 
Sig	I certify that I have exa gnature of Candidate oh, Matthew, Patrick, Mr,			[Elect	ronically Filed]	Date	
Sig	I certify that I have exa gnature of Candidate oh, Matthew, Patrick, Mr,			[Elect	ronically Filed]	<b>Date</b> 01/11/2022	
Sig	I certify that I have exa gnature of Candidate oh, Matthew, Patrick, Mr,			[Elect	ronically Filed]	<b>Date</b> 01/11/2022	

FEC FORM 2 (REV. 02/2009)

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F2A Transaction ID:

Updated address to PO Box. Added campaign emails for treasurer and custodian of records.

Form/Schedule: Transaction ID: